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PREPARATIONS FOR THE INTERNATIONAL CONFERENCE ON POPULATION AND DEVELOPMENT

Recommendations of the Expert Group Meeting on Population Policies and Programmes

Report of the Secretary-General of the Conference

SUMMARY

In response to Economic and Social Council resolution 1991/93, the Expert Group Meeting on Population Policies and Programmes was convened in Cairo from 12 to 16 April 1992 as part of the preparations for the International Conference on Population and Development to be held in 1994. The findings of the Expert Group are presented in this report for consideration in the context of the review and appraisal of the World Population Plan of Action by the Population Commission acting as the Preparatory Committee for the Conference. The Expert Group examined the policy implications to be derived from the current state of knowledge of the complex interrelationships between population policies and programmes, patterns of development and the mobilization of resources for population activities at the national and international levels. The deliberations had as their objective to contribute to the review and appraisal of the progress made in attaining the objectives, goals and recommendations of the Plan of Action, to identify the obstacles encountered and to adopt a set of recommendations for the next decade in order to respond to population and development issues of high priority.

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INTRODUCTION

A. Background

1. The Economic and Social Council, in its resolution 1991/93 of 26 July 1991, decided to convene an International Conference on Population and Development under the auspices of the United Nations and decided that the overall theme of the Conference would be population, sustained economic growth and sustainable development. The Council authorized the Secretary-General of the Conference to convene six expert group meetings as part of the preparatory work.

2. Pursuant to that resolution the Secretary-General of the Conference convened the Expert Group Meeting on Population Policies and Programmes in Cairo from 12 to 16 April 1992. The Meeting was organized by the Population Division of the Department of Economic and Social Development of the United Nations Secretariat in consultation with the United Nations Population Fund. The participants, representing different geographical regions, scientific disciplines and institutions, included 15 experts invited by the Secretary-General of the Conference in their personal capacities; representatives of the five regional commissions, the International Labour Organisation (ILO), the Food and Agriculture Organization of the United Nations (FAO), the United Nations Educational, Scientific and Cultural Organization (UNESCO), the World Health Organization (WHO) and the World Bank. Also represented were the following intergovernmental and non-governmental organizations: the League of Arab States; the Organization of African Unity (OAU); the International Planned Parenthood Federation (IPPF); the International Union for the Scientific Study of Population (IUSSP); and the Population Council.

3. As a basis for discussion, the 15 experts had prepared papers on the agenda items. The views expressed by the experts were their own and did not necessarily represent the views of their Governments or organizations. In addition to the expert papers, brief discussion notes had been prepared by a number of the specialized agencies and non-governmental organizations.

B. Opening statements

4. Opening statements were made by the Minister of Health of Egypt, representing the Prime Minister of Egypt, the Secretary-General of the National Population Council of Egypt, the Secretary-General of the International Conference on Population and Development, and the Deputy Secretary-General of the Conference.

5. In her opening statement, the Secretary-General of the Conference noted that it was very appropriate that the Meeting should be held in Egypt, where a population policy had long been in place and where the fruits of many years of programme development could be seen. Indeed, the Meeting was informed that the latest estimates from the PAPCHILD survey for Egypt indicated continuing

declines in infant and child mortality and a recent increase in contraceptive prevalence, with a corresponding reduction in the total fertility rate. The Secretary-General emphasized that the framers and executors of Egypt's population policy were to be congratulated on that clear evidence of their success.

6. The Secretary-General noted that the successes and failures of over 20 years of experience in population policy implementation and programme activity had taught many lessons. Successive evaluations had documented continuing progress in policy and programme development, including a significant increase in the outreach and effectiveness of population programmes around the world and real, measurable progress in regions that had traditionally lagged behind, such as sub-Saharan Africa and the Middle East.

7. The evaluations had confirmed what was required for population policies and programmes to be truly effective - namely, political commitment, manifested in the allocation of human and financial resources in support of population activities; mobilization of individual and community support and active local participation in defining and implementing programmes; involvement of women at all stages of the planning and execution of programmes; development of an institutional framework for delivering services; the training of service delivery personnel; and development of networks of distribution points.

8. Despite the difficulties of the 1980s, the Meeting was informed that the flow of national and international resources for population programmes had been maintained. Moreover, developing countries themselves were investing more in population activities. But even in countries with more available resources and longer histories of programme development, it had been found that international assistance could play a catalytic role, encouraging the exploration of new approaches, generating and maintaining institutional dynamism and addressing new needs.

I. SUMMARY OF THE PAPERS AND DISCUSSION

A. Population policy

9. The paper entitled "Evolution of population policy since 1984: a global perspective", prepared by the Population Division of the Department of Economic and Social Development of the United Nations Secretariat, reported that, since 1984 when the International Conference on Population had been held at Mexico City, the issue of population growth had become less politically divisive. Over the past decade, there had been a growing convergence of views at the national level, with many more countries now in favour of modifying population growth.

10. Whereas there was continuing debate over how to achieve it, the ultimate, internationally accepted goal - as enunciated at Mexico City - was the stabilization of global population within the shortest period possible. The

participants agreed that meeting those targets would involve assigning a higher priority to population in development programmes and extending family planning information and services to perhaps 2 billion people.

11. In regard to fertility levels and trends, the participants concurred that there were a number of hopeful signs. For the first time, fertility was declining in all major regions of the world, as increasing numbers of Governments had adopted policies to regulate fertility. The participants agreed that evidence from 25 years of experience in organized family planning programmes showed that a good quality service, with consistent political and administrative support and innovative public education efforts, could produce very rapid voluntary changes in reproductive behaviour in a wide variety of economic, political, social and religious settings.

12. The Expert Group was in agreement that, for the developing world as a whole, the past 25 years had been a period of unprecedented progress in regard to reducing mortality and improving health. However, that impressive overall performance concealed an extremely uneven pattern of progress. Regarding the major directions in health-care policy, it was noted that, throughout the developing world, since the landmark Alma-Ata Conference in 1978, there had been a marked shift from a curative, hospital-based health-care approach to one focusing on preventive, primary health-care strategies. It was reported that an emerging health concern in both the developed and developing countries was the spread of the acquired immune deficiency syndrome (AIDS). Recently, the epidemic had expanded its geographical scope, reaching countries and regions previously unaffected or only slightly affected by the human immunodeficiency virus (HIV virus).

13. The participants were informed that, although international migration had occasionally had significant demographic impacts, few Governments had adopted international migration policies for demographic reasons. Moreover, until fairly recently, the area of international migration had been considered somewhat peripheral to the mainstream of population policy.

14. The participants were also informed that, despite Governments' concerns over the past two decades with their patterns of population distribution, population distribution policies had become somewhat discredited, mainly because there had been many more failures than successes. Frequently, the goals of population distribution policies had been unrealistic, leading to disenchantment and eventual abandonment. A further problem had been the fact that there had been insufficient continuity in the implementation of population distribution policies in many developing countries.

15. Some of the participants noted that, although many of the developing countries were overwhelmed by external indebtedness, weakening economies and poor management, unabated population growth remained one of the major threats to progress. Over the past two decades, a mix of national and international complacency in regard to the urgency of population issues had resulted in millions of unwanted births in many developing countries, threatening to overtake their hope of achieving sustainable development and alleviating poverty.

16. The discussion which followed focused on the context in which population processes and policies had taken place. It was noted that the globalization of the world economy had led to a larger gap in standards of living between developed and developing countries, to more social inequality and higher proportions of the population of the latter living in absolute poverty but also to a globalization of a culture of modernity expressed, among other things, in changes in patterns of consumption and aspirations and in new family patterns and gender roles.

17. At the political level, attempts in most countries to redefine the role of the State by the shrinkage of state bureaucracies, the transfer of government-owned enterprises to the private sector, and decentralization of decisions to the local level, were contextual factors that would continue to affect both population trends and the success of population policies and programmes.

18. Given those changes, the Meeting questioned whether there were any means by which population growth rates could be significantly reduced. One option would be to continue applying the same prescription - namely, to rely on the market economy in the hope that it would quickly rescue the poorest countries from the abyss of underdevelopment. A second option - to establish an obligatory maximum limit for the number of children per family - was politically unviable and clearly violated the World Population Plan of Action. A third option, sometimes referred to as "equitable development", involved raising Governments' social policies - education, public health, housing, employment, social security - from their current secondary role and placing them on at least equal footing with policies aimed first and foremost at achieving economic growth. The participants were in agreement that action along those lines seemed to offer the best chance of achieving the goal of alleviating consequences of rapid population growth and inappropriate spatial distribution.

19. In the discussion on population policies in sub-Saharan Africa, it was noted that, at the time of the 1974 Population Conference, many African Governments considered their fertility levels to be satisfactory. Since then, demographic and health justification for a small family norm had evolved and more than half of all African countries had formulated explicit policies to reduce fertility.

20. The Group was informed that about 90 per cent of African Governments gave direct or indirect support to family planning programmes to influence fertility and/or to improve maternal and child health. However, about two fifths of all the countries in Africa either had no intervention programme or had adopted family planning programmes for health reasons only. Among the countries that had adopted family planning programmes intended to lower fertility and population growth, it was noted that a few (notably Botswana, Zimbabwe and, more recently, Kenya) had been successful in realizing programme objectives.

21. The participants acknowledged that many African Governments had not progressed beyond the rhetoric of family planning. The example of programmes that had succeeded in lowering fertility levels underscored the importance of political commitment, manifested not only by consistent and substantial financial support but also by regular pronouncements by high-level policy makers regarding the need for adoption of the small-family norm.

22. The participants recommended that African Governments show greater commitment to implementing existing family planning programmes; that Government actions to influence fertility should be coordinated with actions in other sectors and that, conversely, the impact of development efforts on fertility should also be monitored; that, in view of the demonstrated effect of female education and participation in the development process, schooling for all girls should be a top priority in social development; and that, among a still largely illiterate population, new and imaginative information, education and communication campaigns needed to be devised to encourage attitudinal change in favour of the small-family norm.

23. In the disscussion that followed, it was noted that, although there had been an overall shift in African Governments' perceptions of population problems, there was an obvious inconsistency between the proportion of countries that were concerned with those various aspects of their population trends and the proportion that had taken action to formulate policies. In other words, the Group questioned the extent to which reported perceptions reflected reality and/or to what extent they more or less constituted a "facade".

24. The Group further agreed that, although the formulation of a population policy was a necessary condition for inducing a reduction in fertility and hence ensuring sustainable development, it was not a sufficient condition. The design of an effective action plan for implementing the policy measures was equally important; so also were dynamic and committed leadership, local political support, interested private organizations and institutions, a receptive audience and availability of resources. Moreover, it was noted that, overall, implementation of population policies and programmes depended greatly on the priority assigned by the Government to population issues. In countries where population issues remained sensitive matters, with considerable opposition from various interest groups, it had been difficult for population planning agencies to compete for scarce government resources to implement their programmes.

25. In the discussion of population policies in the countries of North Africa and the Middle East, the Meeting noted that the region's population shared common social, cultural and linguistic features. Demographically, most countries of the region were similar in having relatively high population growth, young population structure, high rates of marriage, especially at the younger ages, high fertility and large family size norms, declining mortality and morbidity, and high rates of urbanization. Only four countries in the region - Algeria, Egypt, Morocco and Tunisia - had explicit population policies with specified targets and implementation mechanisms.

26. In commenting upon the fact that only four Arab countries had formulated explicit population policies, the discussant noted that population policy was still a vague concept. Despite the population policy database maintained at United Nations Headquarters, it was suggested that the manner in which population policies were assessed in the Arab countries was perhaps inadequate. Rather than relying on the United Nations Population Inquiries among Governments, perhaps the only way to assess such policies was through in-depth field surveys.

27. In the discussion on population policies in Asia, it was noted that, because Asia was the world's most populous region, the population policies of the Asian countries were very important. Actual performance in the implementation of those policies had a strong impact on global population trends. The Meeting agreed that most Asian countries had excellent records regarding the formal adoption of population policies, although dissemination of information about those policies was not always done effectively.

28. Given the fact that countries in Asia generally had been successful in implementing their population policies, a number of recommendations were identified to assist countries in other regions in achieving their population goals. While population limitation objectives were best made explicit and operationally defined in terms of quantitative targets, the participants noted that it might be better, in some instances, to integrate such goals with broader social and economic development strategies. Policies that complemented population limitation measures should be included in explicit population policies. Those might include interventions such as raising the minimum legal age at marriage, introducing literacy and educational programmes for women, encouraging young girls to stay in school longer, mobilizing non-governmental organizations for family planning campaigns, encouraging the private and commercial sector to play a more active role in population matters and so forth. Availability of contraceptive methods was a crucial element in a comprehensive population policy. When appropriate, local production of contraceptives should be fully supported.

29. The Group also emphasized that gender considerations should be explicitly included in national population policies. The ageing phenomenon ought to be studied more closely, and the implications of the process for comprehehsive population and development policies should be emphasized. Although most countries considered population distribution to be an important problem and although studies had been made of efforts to correct maldistribution of population, specific reasons for the success or failure of those interventions were poorly understood. More intensive country case-studies, carried out in a comparative perspective, should be conducted.

30. The Expert Group was in agreement that international migration in Asia, as in other parts of the world, promised to be one of the most important aspects of population policy. However, international migration was often not included in explicit population policies. In particular, the demographic effects and impact of international migration had been poorly analysed. The performance of specific measures such as training people who might wish to

emigrate, maximizing the benefits from income remittances of migrants to countries of origin, and so forth, had not been adequately evaluated. These and other similar measures should be included in a country's population policy.

31. In the discussion that followed, it was noted that the population policies adopted by most Asian countries were justified by their impact - namely, improving the quality of life. However, when those policies were translated into action, they became population control policies with well-defined quantitative targets, with little or no attention to quality. The situation, however, was changing, particularly in countries where demographic goals had either been achieved or were close to being achieved. The participants noted that many Asian countries were striving to adopt innovative strategies and new programme directions in order to sustain the successful achievement of demographic goals - e.g., by paying serious attention to improved service delivery systems, the training of service providers, contraceptive technologies and choices, and family support systems.

32. In the discussion on population policies in the Latin America and the Caribbean region, the Group noted that, in many countries in the region, the favourable demographic results had been achieved in the absence of a population policy.

33. During the 1980s, three concerns had marked the decision-making framework for policy initiatives within the Latin American region: the economic crisis and its deteriorating effects on the social and physical environment; the debate on a new role for the State; and the integration of women in development.

34. The Group noted that the health sector in many countries in the Latin America and the Caribbean region had already been experiencing serious deficiencies by the beginning of the economic crisis. It was estimated that 130 million persons in the region had no regular access to health-care services. Estimated population growth would place an additional 110 million persons in need of health care. It was noted that the most revealing indicator of the deterioriation in living conditions was the presence of cholera in the region. Also, the increase in the level and intensity of poverty throughout the 1980s had had a special impact on women. It was noted that the "feminization of poverty" and increases in the percentages of women as heads of households in poor and indigent families had been well-documented.

35. In the discussion that followed, the participants noted that there was a clear trend in Latin America and the Caribbean to increase the recognition of population as a valid field for public policy. Within that framework, there was an increase in the number of Governments that reported that they either definitely wanted lower rates of population growth or that they would support individual decisions to lower fertility through family planning programmes. The Group acknowledged that, whereas there had been an increase in the number of population policies approved as such and of population policy statements, that did not necessarily imply effective implementation. However, it did

define a positive trend and, most importantly, gave greater social legitimacy to services that were already being offered by non-governmental organizations, the private commercial sector and even the public health sector, but whose development ran against former negative attitudes of many Governments.

36. In the overview on population policies in the developed countries, the Meeting noted that it was surprising that, after several decades of population policy research and debate, there was still no clear definition of population policy in many of the developed countries. Addressing population policy issues in the developed countries was sometimes controversial because the demographic problems were usually not as pressing as in the developing countries. Moreover, the well-known general pattern of sustained low or declining fertility, slow, zero or negative population growth, and the associated progressive ageing of the population were processes and phenomena to which the developed countries had had a relatively long time to adjust. Whereas population-related policies existed in all of the developed countries, many countries did not consider the sets of measures which were implemented for social or welfare reasons to be population policies. Nevertheless, those policies did have certain demographic impacts, even if they were unintended.

37. The participants noted that the effectiveness of fertility policies - which were typically pronatalist - had varied and largely depended on whether the measures sought to influence the desired family size or were aimed at assisting couples in fulfilling their desired family size. Most policies and measures had had short-term effects in raising the number of births, but seldom in increasing cohort fertility. The Group also observed that, along with policies responsive to the ageing process, socio-economic differentials in morbidity and mortality and in access to adequate health care were issues in the developed countries that called for policy action.

38. Regarding international migration policies in the developed countries, the Meeting questioned whether the potentially shrinking labour forces of most European countries should be expanded by immigrant labour, particularly from Eastern Europe. It was concluded that the demographic situation in Eastern Europe was similar to that of Western Europe; hence, the ageing and the decline of the potential labour force in the Eastern countries was occurring at more or less the same pace and with the same timing.

B. Population programmes

39. In the introductory discussion on population programmes, UNFPA, in its paper, "Experience of 20 years: achievements and challenges", noted that data generation and policy analysis had shown that the population issues currently needing attention and the nature of the issues that would endure until nearly the end of the next century were more numerous and of greater scale than had been anticipated. The importance of the 1990s arose from three issues. First, near-term targets were needed to guide planning and to serve as criteria for programme impact. Secondly, there was need to check a significant part of the momentum of population growth in the decade so that

population stabilization would occur at acceptable levels. Thirdly, near-term estimates challenged participating countries to examine their levels of commitment.

40. The Meeting noted that UNFPA had been a principal advocate for developing the needed capacity for policy analysis and had included support for such activities in its annual work plan. Bilateral contributions and analytic efforts by scientists working for international population non-governmental organizations had been very important. Among the results had been an increase in the number of countries with population policies and programmes and with units established to monitor these policies and programmes.

41. The participants observed that an equally important policy development over this period had been the growing emphasis on the status of women. Their special involvement in population change and the necessity of removing the personal and societal costs of longstanding inequities was now universally recognized.

42. The Group was informed that a number of lessons had been learned from the major review and assessment exercise recently concluded by UNFPA. One problem was to incorporate knowledge into programme design and implementation specific to the wide variety of very distinct socio-cultural and behavioural factors seen around the world. Another problem was that population programmes seldom fit neatly with overall development objectives and other social policies and received low priority and small financial outlays. Still another constraint was over-reliance upon the governmental sector. It was noted that bottlenecks were likely without the support of community organizations and other grass-roots, non-governmental institutions.

43. The participants also identified a number of important challenges that lay ahead. In the maternal and child health and family planning field, the major challenges included making services more accessible, improving their quality and reaching previously underserved populations, partly by means of strategic planning. Such strategic planning, in reference to information, education and communication (IEC) and other population-related activities involved a number of factors, including adoption of a long-term time horizon, selection of critical points for intervention, coordination of programme efforts, and careful programme design and planning. Factors of critical importance to the success of programmes had been found to be the quality of family planning services, culturally sensitive IEC activities, improvements in the role and status of women, and effective policy planning units that were coordinated with other development planning efforts. The Group was informed that the review had led UNFPA to adopt a strategic approach to programming by instituting the Programme Review and Strategy Development (PRSD) methodology.

44. Regarding financial and material resources to the year 2000, it was reported that, if global population stabilization was to occur during the twenty-first century, it was essential that the proportions of couples in developing countries using contraception rise during the 1990s from the initial level of about 50 per cent to slightly over 64 per cent by the year

2000. It was estimated that such an enhanced programme for the year 2000 would cost about $8 billion in public funds (in constant 1990 dollars).

45. In conclusion, it was noted that the Amsterdam Declaration on a Better Life for Future Generations, adopted at the (1989) International Forum on Population in the Twenty-first Century, 1/ had accepted the United Nations medium-variant population projection as a baseline by which to plan efforts to achieve balanced and sustainable growth. When combined with estimates of the use and cost of contraception, it was possible to project major components of future resource needs. UNFPA was ready to supply much of the needed leadership to assemble the resources required for expanding population programmes to meet those targets. Survey data indicated that current unmet demand was of sufficient magnitude that the targets of the Amsterdam Declaration could be reached with expanded programmes. The challenge facing Governments and the international donor community was to mobilize the funds, the human resources, the institutional capacity and the political will to do so.

46. The Expert Group Meeting was in agreement that the past decade had seen a considerable consolidation of knowledge and experience in the design and implementation of population activities in developing countries. Moreover, over the past two to three years some interesting changes in direction had emerged. First, increasing attention had been given to the processes for broad population programme strategy development as a precursor to the formulation of detailed project activities. At the same time, there had been a resurgence of interest in reassessing population as a development activity. Several factors lay behind that; there was a growing emphasis on individual rights, welfare and needs; measures to improve the role and status of women were commanding increasing attention; environmental concerns had come more to the fore; also, the progress and prospects for economic and social development had not been as positive as had been hoped. That had increased pressure to ensure that the limited resources which were available for social service provision were well spent.

47. The participants noted that considerable experience had been built up over the past decade in the design and implementation of population activities. Family planning programmes in particular could be formulated with increased confidence, enabling them to achieve worthwhile impact and effectiveness. None the less, on some key aspects of population programme development there remained disparate views and considerable uncertainties. They raised questions as to which activities should be featured in a national population programme, alongside family planning provision and population information education measures as core components; what prioritization was appropriate between population activities in the light of resource constraints; and what approaches should be pursued to establish a more coherent population dimension for labour, social security and environmental policies.

48. The Group suggested that further refinement in the process used for population programme needs assessment should be sought, through a more precise

articulation of broad programme strategies (i.e., the issues that had to be tackled if the programme was to achieve its short- and medium-term goals) and greater attention to institutional analysis (i.e., the respective roles and capacities of institutions with responsibility for policy formulation and dialogue, regulation and standards-setting, programme planning, programme management, service delivery, programme monitoring and evaluation, and research and training). Also, action research was needed to establish and demonstrate the effectiveness of new approaches, particularly in regard to issues of women's reproductive health.

49. In the paper entitled "Population programmes: the case of Rwanda", the Meeting was informed that Rwanda's social and economic situation was such that emergency steps had to be taken to solve the population problem. Rwanda's population policy was intended to make the population more aware of socio-demographic problems by information, training and education in family well-being and to spread the use of all contraceptive methods allowed by the authorities in all of the country's public health units. The Meeting was informed that, currently, more than 85 per cent of the population was believed to be aware of the country's socio-demographic problems. Rwanda's population policy had the ambitious goal of reducing population growth to 3.6 per cent in 1990 and to 2.0 per cent by the year 2000, by applying family planning methods, so as to lower the number of births per woman from 8.5 in 1990 to 4.0 by the year 2000. This would necessitate increasing the level of contraceptive prevalence from 12 per cent to 48.4 per cent in less than 20 years.

50. In the second country case-study, entitled "Population programmes: national case-study of Indonesia", the Meeting was informed that the gradual slowing of the Indonesian population growth rate was the direct result of the concentrated, steadfast and visionary approach that the Indonesian Government had taken towards population control. Since 1970, the fertility rate had fallen by 46 per cent. The population growth rate had been reduced from a potentially insupportable level of over 2.3 per cent per annum in the mid 1960s to 1.97 per cent annually in the mid 1980s, making Indonesia one of the middle-income developing countries with the lowest population growth rates. That would be even more impressive if Indonesia achieved its planned growth rate of 1.6 per cent by 1995.

51. Indonesia's 21-year-old family planning programme attributed its successful performance to information, education and motivational campaigns; institutional development; the wide availability of contraceptives; and village-level health care. The programme enjoyed active, broad-based support at every level, from local community leaders to the President of Indonesia. The Ministry of Information had been an integral partner from the outset, using modern methods of mass communication to make family planning as a concept and its technical details common knowledge. Talk of family planning was actively removed from the realm of private unspoken behaviour and placed squarely in the public domain.

52. The participants were informed that when the Indonesian family planning

activities were just beginning, during the late 1960s and early 1970s, some of the Indonesian family planning workers visited a number of other countries to learn from their family planning programmes. They observed and discussed other programme successes and failures. Programmes were adopted by adapting certain elements and modifying them to fit the Indonesian cultural context.

53. The Group noted that many observers had concluded that community participation was a major reason for the success of the Indonesian programme. In some areas, community members were willing to receive and distribute the monthly resupply of contraceptives to each participating household for a small stipend. That rapidly evolved to a fully volunteer, unpaid network of suppliers throughout Java and Bali, where indigenous community organizations seized the opportunity to provide a useful and desired community service and established community-based family planning clubs.

54. Another reason for the Indonesian family planning programme's success was that all motivation was based on a single, simple concept: the promotion of the "small, happy, and prosperous family" norm. Although contraceptive methods were explained by medical personnel, the primary responsibility of volunteers was to facilitate the acceptance of family planning and of the "small, happy and prosperous" family norm by relating them to the sociological and economic situation of their particular areas in ways that were easily understood and accepted by their neighbours.

C. Mobilization of resources

55. In the paper entitled "Mobilization of resources: public, private and non-governmental", the Meeting was informed that, during the 1980s, many developing countries had adopted stabilization and structural adjustment policies, defined as a set of economic policies put in place to restore the economy to a sustainable growth path. During the stabilization phase, the prices of imported goods typically increased as a result of devaluation and price liberalization, resulting in a shortage of supplies. One of the immediate responses to the situation had been the implementation of user charges which not only aimed at promoting greater cost efficiency in the use of diminished resources but also represented a new source of revenue. Noting that user charges had been introduced in the health and/or education sector in many countries in Africa, Asia and Latin America over the past decade, the participants cautioned that such charges could constitute a significant barrier to social services and the attainment of global population goals unless they were accompanied by an increase in family income levels and/or the establishment of a mechanism for subsidizing the poor. The participants noted that the viability of cost recovery schemes - the goal of which was sustainability through the establishment of a revolving fund - obviously carried the same constraints as user charges.

56. Regarding cost-sharing, the Expert Group noted that the experiences of various countries had shown that communities were willing to share the costs of national development with Governments in addition to paying for their

recurrent costs. The participants emphasized that involving the private sector was a variant on the cost-recovery strategy, in that sections of a community that could afford to pay the full price for their services were encouraged to do so, thereby permitting government funding to be directed to the neediest group within the community.

57. The participants emphasized that the active involvement of the private sector and non-governmental organizations necessitated adequate management support systems. Accountability to the community was probably the single most important requirement for success in cost-recovery and cost-sharing systems. By keeping revenues generated from cost-recovery/cost-sharing schemes at the local level, accountability could be monitored by revenue collected as well as by improvement in the quality of care. The participants noted that it was not surprising that, as many government leaders in the developing world grappled with the need for increased domestic resources, "accountability" and "decentralization" were becoming key words.

58. In a paper entitled "The special problems of least developed countries", the Expert Group was informed that the reality in the population sector was characterized by population control programmes that were donor-dependent and donor-shaped. The dominant model of administrative organization for population control programmes throughout much of the developing world, with its decentralized, top-down bureaucracy for essentially transferring contraceptive technology, had been responsible for the absence of local initiatives regarding the formulation of a self-sustaining and viable programme. The existing model was non-viable in the long run and could not be sustained in the impoverished settings of the least developed countries.

59. The participants agreed that the crucial problem of resource mobilization for the implementation of a pragmatic and contextually appropriate population programme in a least developed country consisted of initiating and sustaining a capability to self-finance programmes indigenously, at the local level and from within the community. The identification of internal resource mobilization as the strategy for long-term programme viability was rationalized on the grounds of both the need for a greater national role in comparison to donor roles and a greater role for the community and the local government in comparison to the role of the national Government. The Group discussed the barriers confronting the process of effective devolution of decision-making authority and financial autonomy. It also identified the formidable constraints faced by local governments in mobilizing community support and in generating sufficient local revenue for development programmes, including those in the population sector.

60. The Meeting was informed that the population field faced a major dilemma in the last decade of the twentieth century: the very success of population programmes had engendered a growing scarcity of resources which threatened to place a severe damper on the momentum of the programmes just as they were reaching maximum effectiveness.

61. From roughly 1980 onward, the demands for population assistance began to

outstrip the supply of population assistance funds. Since 1974 it had been learned that success in family planning programmes required sustained donor commitment over a number of years. The challenge for the population donor agencies was to ensure that the commitment of resources was sustained until the final chapter of the success story was complete. In that endeavour, the multilateral organizations had to be key players.

62. The participants agreed that it was incumbent on the multilateral donors to examine seriously the issue of cost efficiency and to ensure that their funds were being used to maximum advantage. That meant, among other things, increasing coordination with other donors and non-governmental organizations, not only at the headquarters level but, more importantly, at the country level.

63. It was pointed out that, as donors and multilateral agencies planned their responses to the increased demand for financial assistance to population programmes, it would be important for them to think strategically at the country level. Countries with strong programme effort and high demand for family planning services would be able to absorb larger amounts of funding. They were in a position to use the typically large loans provided by the World Bank effectively. At the same time, some of those countries might be reaching a point where rising incomes would make it possible for more of the cost of services to be assumed by users and more of the programme effort to be provided by the private sector. Countries with weak programme effort and/or less fully articulated demand for services would require a different strategy.

64. Considering that UNFPA was the principal United Nations organization in the field of assistance to population programmes, the Meeting agreed that UNFPA was in a position to take a more assertive role in donor coordination, both globally and locally. The participants noted, however, that the UNFPA project development process had resulted in the "atomization" of resources into many small projects. It was argued that it was perhaps difficult to achieve measurable impacts with so many very small, dispersed projects.

65. The Group was informed that the World Bank typically lended for large projects which ultimately promised large economic returns. The Bank often found it difficult to finance the relatively small investment needs and the recurrent costs, such as contraceptives and salaries, which were the principal requirements of population programmes. Also, countries often did not wish to borrow for population projects, even at concessional IDA (international development assistance) rates, because of a reluctance to borrow for social-sector programmes.

66. The participants were informed that the Amsterdam Declaration called for a doubling of support to the population sector by the year 2000. Since those endorsements, the funding environment had changed. The AIDS crisis had continued to present ever-growing needs, while Eastern Europe and the environment represented "new", competing needs. In addition, the economic situation of donor countries themselves had not improved. It was therefore not a foregone conclusion that funding levels for population activities would increase.

67. Regarding the profile of bilateral donor support, the Group noted that no donor had the delivery capacity of the United States of America. At the end of the 1980s, there was intensive bilateral donor activity in a few other countries. Only a handful of countries received the support of many bilateral donors: Bangladesh received support from 10 donors; Kenya, nine; United Republic of Tanzania and Zimbabwe, five each; while five other countries received support from four donors; and six others were given assistance by three donors. Twenty-two countries had only two donors and 23 others had single donors acting bilaterally in the sector. If only those activities receiving over $1 million were counted, donor presence was reduced considerably in most instances.

68. The participants agreed that the donor profile became critical in light of the increased importance of the bilateral channel in United States assistance and recently proposed changes to that assistance. A new United States initiative, Bigger Global Impact, would focus bilateral population assistance on 17 strategic countries while phasing down and/or halting funding in other countries, at least in terms of bilateral assistance.

69. To maintain current levels of contraceptive prevalence in an expanding population, it had been estimated that donor funding levels would have to double by the year 2000. To meet that basic needs scenario, against the background of a changing United States assistance profile, donors would have to expand their activities in the sector considerably.

70. The Meeting noted that experience and expertise in technical cooperation and the provision of population assistance was limited to a few donor countries. Many donor countries had, nevertheless, some experience in a limited number of population activities, such as data collection and analysis, academic training and research, or population policies, principally related to immigration.

71. Since a few donor countries had a considerable head start on the other donors in the field of population assistance, the Meeting concluded that such expertise should be shared with other interested donor countries, particularly in light of the challenges and increasing needs for such assistance in the coming decades.

72. The participants discussed the relationships between population policies and other social and economic policies and concluded that, although population policies were adopted courses of action intended to affect population variables, the adoption of such goals and objectives found their justification in the improvement of individual and collective well-being. In that sense, population policies were to be conceived as components of socio-economic policies and not as their substitute, as had been affirmed in the World Population Plan of Action. The Meeting recognized that more attention should be given to the design of social and economic policies and strategies that would respond to future changes in the size, composition and distribution of the population. In that respect, it was noted that, in some cases, a special emphasis had been placed on reducing fertility as an offset to environmental

damage, without taking sufficient note of the fact that the adult population, whose decisions and activities had the greatest effect on the environment, would increase by 90 per cent or more over two decades in many developing countries, whatever the trend in fertility.

73. The Meeting had an opportunity to discuss the Matlab project in Bangladesh as an example of a comprehensive population policy. The substantial progress in reducing fertility and expanding the use of contraception in a poor, rural, conservative population in the absence of substantial improvements in economic well-being provided a model for programmes in other countries in which fertility remained high and the population was impoverished, not well-educated and mostly rural. To replicate the model would require experimentation in seeking a feasible mechanism in the local administrative and cultural setting to create outreach to individual households involving trained local personnel, and to create the necessary network of administrators, clinical facilities and the like. Such a strategy should be made part of the agenda of international efforts to assist the developing countries in making effective contraception available and enabling couples to make a free and informed choice concerning their family size.

74. Regarding the set of socio-economic policies designed to respond to future population characteristics, the participants observed that such policies had not received the priority required in many developing countries. In some instances, population policies aimed at reducing fertility had been conceived as the best remedy to combat poverty and backwardness, without taking into account that their impact would be limited if they were not accompanied by other socio-economic policies. Such limited approaches ignored, for example, that the size and the growth of the adult population of a given area was not affected by family planning decisions until after 15 or 20 years. In East and West Africa, for example, population projections showed an increase in the total population of about 80 per cent from 1990 to 2010; that increase might be diminished by a more rapid introduction of family planning. However, the population aged 15 years or over would increase by 90 per cent between 1990 and 2010, and that increase would not be tangibly affected by family planning programmes yet to be introduced or augmented.

75. The participants were informed that organizational research was the neglected stepchild of family planning programmes. Despite enormous support given to finding ways to limit fertility, there had been a neglect of research on the organizations that carried out family planning programmes.

76. Regarding the achievements and limitations of various family planning programmes around the world, the participants observed that, in those countries where such activities had been under way for several decades, with rather limited results, the major handicap was related to their organizational characteristics.

77. The Meeting noted that it was reasonable to ask why research on family planning organizations had been neglected relative to other components of family planning and fertility, such as breast-feeding and operations

research. The participants concluded that the answer to the question was that research on the organization of family planning programmes was regarded as "too sensitive" by funding agencies and family planning organizations.

78. There was also the issue of administrative overload in many family planning programmes. Every programme was faced with a problem of internal management, field and client relations, relations with other sectors of government, and managing the delicate political and diplomatic linkages with international and foreign agencies. Although all government agencies confronted a similar array of problems and demands, family planning was different in that it was attempting to provide a service that the would-be beneficiaries might not be demanding. The complexity and difficulty of a family planning programme justified the assertion that, qualitatively, family planning was not just another government programme.

79. Since family planning activities had received high priority from the donor community, such programmes had led to the creation of units responsible for external and donor relations. That was no modest task; indeed, the domestic system often became overburdened with the need to provide reports, field trips, detailed accounting of funds and materials received. Adding to the burden, in many instances, field operations of foreign or international agencies typically had not formally coordinated their activities with one another, resulting in overlap, repetition and redundancy.

80. The Group recommended that there was need to conduct research on family planning organizations. More attention was needed to be given to programme leadership and to interorganizational relations as a discreet area of inquiry in population policy research.

81. In regard to research on population policies, the participants concluded that a number of questions remained to be answered before rational and effective policies could be formulated. For example, under what specific socio-economic and political circumstances were development strategies alone more effective than family planning programmes in achieving a reduction in fertility, and when was the opposite true? How did policy makers identify empirically the two types of situations? What type or structure of development was the most effective in reducing fertility?

82. The Meeting was informed that answers to the above questions could not be effectively reached through comparative research alone but required the development of a causal theoretical framework that would take into account the different characteristics and modalities of the demographic transition.

83. A number of policy implications could be derived from such analysis. For population groups in the early stages of the demographic transition where the desired number of children exceeded the maximum achievable number, a policy of fertility reduction was not likely to have immediate effects. A family planning programme would have little or no impact on fertility levels. All that should be done under those circumstances was to create the socio-economic environment that would lead to a modification of family-size preferences.

84. The participants were informed that reducing the demand for children should be a major policy aim of any fertility reduction policy at all stages of demographic development. Socio-economic policies aimed at reducing the demand for children fell into two categories: policies aimed at affecting the relationship between incomes and standards of living, and policies aimed at affecting the utility and disutility of children. Incentive and disincentive schemes were examples of the former category, and encouraging the employment of women was an example of the latter.

85. One socio-economic policy that seemed to have considerable effect on fertility was that of promoting education, particularly among women and beyond a certain level (generally about six to seven years). The reason was that education operated in the required direction on most of the determinants of fertility. It decreased the utility of children by creating interests that competed with family requirements; it increased the cost of children directly and through the extension of the period of support, raised the standards of living by opening up the couple's horizons to better standards of life elsewhere and by making education part of those standards.

86. The Meeting recognized that any population policy to reduce fertility had to utilize measures that were common to other economic and social policies and, therefore, ran the risk of making contradictory or competing demands. For example, promoting the education of women beyond a certain level would make specific demands on the educational system that might compete with demands made on the system by other development objectives. In that manner, each policy would attempt to influence the structure of development towards its goals, leaving it to the decision-making processes to determine - through trade-offs arrived at rationally and explicitly or otherwise - the dynamic structure that would prevail. It would therefore be essential for population policy-making to be substantially integrated into overall policy-making and for an appropriate institutional arrangement to be developed to ensure that integration.

II. RECOMMENDATIONS

A. Preamble

87. The World Population Plan of Action affirms that the major goal of human development is to ensure the achievement of a more equitable distribution of resources and the improvement of levels of living and the quality of life of all people, in accordance with the upholding of human rights, as outlined in the Universal Declaration of Human Rights. The Plan also affirms the right of women to be completely integrated into the development process, the rights of the child, and basic respect for the sovereign right of nations to choose population policies that reflect national objectives and conditions. The Plan also recognizes that population policies should be comprehensive, including all components of population.

88. Global experience in the formulation and implementation of population policies and programmes since the adoption of the Plan of Action in 1974 reveals strong linkages between population trends, socio-economic development and the environment. These findings were highlighted at the International Conference on Population, held in 1984, in the quinquennial Review and Appraisal of the World Population Plan of Action, and at the International Forum on Population in the Twenty-first Century (Amsterdam, 1989). Population problems (rapid population growth, ageing, AIDS, reproductive rights of women, refugees and other migration issues, urbanization and spatial distribution) and their complex interactions with such factors as poverty, unemployment and underemployment and environmental degradation, and the effective implementation of national population policies will merit special attention in 1994 at the International Conference on Population and Development. In examining these problems, the needs and requirements of the least developed countries deserve to be given special attention.

89. Achieving the goals of human development, as adopted in the International Development Strategy for the Fourth United Nations Development Decade, requires concerted action in all major socio-economic fields, including population, at the international, regional, national and community levels. As noted in the World Population Plan of Action, policies designed to affect population trends are not substitutes for socio-economic development but should be integrated with those policies to promote development.

90. Population policies and programmes should respond to specific national conditions. More attention should be given to sustaining ongoing efforts and integrating population concerns with health, education, employment, environment and socio-economic development. In most of the countries that have formulated population programmes, there is need to strengthen policy formulation and programming mechanisms, improve service delivery systems, and adopt innovative management of multisectoral programmes.

91. The need for political commitment remains. Moreover, sufficient resources are required, particularly in the least developed countries, for the strengthening of country institutions that adopt, implement and monitor population and development policy and enable programmes to become more effective and ultimately sustained by domestic resources.

92. The Expert Group on Population Policies and Programmes, recognizing the ongoing socio-economic and political changes that will mark the next decade, having reviewed the experience gained in applying the World Population Plan of Action, and being aware of the key issues in the area of population policies and programmes, adopted the following recommendations.

B. Recommendations

Recommendation 1

In accordance with the spirit of the World Population Plan of Action, Governments should assess and evaluate their national development policies and programmes in light of their demographic impacts, in order to ensure a consistent policy framework that promotes balanced and sustainable development. Given the relevance of population in aspects of societal development, population considerations should be taken into account at all levels of decision-making and in resource allocation in all sectoral agencies and in those pertaining to education, health, labour, industry, agriculture and environment.

Recommendation 2

Governments should adopt a long-term perspective in socio-economic planning activities to ensure that due attention is accorded to developmental sustainability and emerging demographic issues.

Recommendation 3

Governments are called upon to review current institutional structures and arrangements for formulating, implementing, monitoring and evaluating population policies. Governments are urged to designate and financially support an independent expert body to consider regularly the range of population issues that may demand attention either immediately or in the near future. That body should convey its findings to the Government and to the public in periodic reports.

Recommendation 4

Governments should ensure that all institutions, public and private, governmental and non-governmental that are responsible for implementation of population policies be fully aware of the content of those policies and be committed to their effective implementation.

Recommendation 5

Governments are called upon to decentralize the delivery of services which are designed to serve population policy objectives. The participation of local communities, informal groups, non-governmental and private organizations should be promoted and supported in that process, since the efficacy and responsiveness of programmes greatly depend on personal and community-based interactions.

Recommendation 6

Although quantitative aspects of programme delivery remain important, the quality of services, especially of family planning services, should be given

due attention in order to ensure acceptance of, and participation in, the programmes.

Recommendation 7

Governments are urged to build on the partial gains achieved in women's established right to play an equal role in social, economic, cultural and political life. To that end, a high-priority developmental goal is to adopt policies sensitive to gender concerns in the areas of education, economic participation, reproductive choice and health. Women's key role in the policy-making and implementation process should be ensured.

Recommendation 8

In pursuing policies sensitive to gender, Governments should respond to the diverse family planning and health needs of women and men at all stages of their life cycle, emphasize the quality of family planning care, expand contraceptive choice, and institute appropriate personnel development policies and actions.

Recommendation 9

The formulation, implementation and evaluation of population policies and programmes should incorporate community participation at every stage. Non-governmental and grass-roots organizations working in population-related areas should be actively encouraged and supported by Governments.

Recommendation 10

Governments and international organizations should evolve a close partnership with the non-governmental sector. This relationship should reconcile the autonomy of non-governmental organizations with accountability. Complementarity within the sector of non-governmental organizations needs to be furthered by development of its technical, managerial and financial capabilities.

Recommendation 11

Governments should encourage and support community-based development programmes, including those in the population sector. Those programmes should have a particular focus on the poorest groups, with a priority of promoting their well-being and participation, in such a way as to ensure ownership of programmes within local communities.

Recommendation 12

Governments should in particular facilitate assistance by international organizations to local non-governmental organizations with respect to the exchange of information and experience and the provision of innovative, cost-effective and quality service delivery, including demand-creation efforts.

Recommendation 13

In order to meet the existing need and rapidly growing demand for family planning services and to respond to the growing requests for assistance in the population field from Governments and non-governmental organizations, multilateral and bilateral donors should strive to at least double their 1990 contributions to population programmes by the year 2000, as was endorsed in the Amsterdam Declaration on a Better Life for Future Generations.

Recommendation 14

Developing countries should make all possible efforts to generate domestic resources to support service-delivery programmes and the provision of contraceptives, including the selective use of user fees and other forms of cost-recovery, cost-sharing, social marketing, and gaining access to local sources of philanthropy, inter alia. In doing so, they should take all necessary measures to ensure the availability of the highest possible quality of services to all groups and to take special care to protect the interests and meet the needs of those least able to pay.

Recommendation 15

Multilateral and bilateral donor agencies should strengthen their capacity to respond more effectively to requests for assistance and assist in the implementation of population policies and programmes. That will require an increase in the number of professional staff devoted to population activities, a significant proportion of whom should be posted in the developing countries.

Recommendation 16

Donors should ensure effective coordination of their assistance, both at the headquarters and country levels. Recognizing that recipient countries have primary responsibility for donor coordination, UNFPA should play a leading role in assisting Governments to ensure that resources are allocated in the most cost-effective and efficient way.

Recommendation 17

Governments should set clear population objectives and should ensure that adequate resources in their development plans and annual budgets are devoted to family planning services, information, education and communications and other population activities and to social and economic development programmes that support those population objectives.

Recommendation 18

Governments pursuing structural adjustment programmes should monitor and undertake studies on the impact of such measures on population policies and programmes, with reference to the quality of life in general, and conditions of women, children and other affected groups.

Recommendation 19

Governments are encouraged to continue to strengthen the systematic flow of information on population trends in order to be able to monitor demographic change and adopt policies and implement strategies to meet their desired goals.

Recommendation 20

Research is fundamental for policy and programme formulation and implementation. Mobilization of resources for research in population must be considered an integral part of national and international strategies for coping with population problems. To promote reproductive health and safe motherhood, Governments and funding agencies are encouraged to support, in particular, research into the determinants and consequences of induced abortion, including its effects on subsequent reproductive health, fertility and contraceptive practice.

Recommendation 21

Governments are urged to take the necessary action to create sustained political commitment and a climate in which population and related development issues are considered to be central to public policy.

Notes

1/ See A/C.2/44/6, annex.